



PTO/SB/21 (08-03)

AF-3621

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/639,014
Filing Date	August 15, 2000
First Named Inventor	Gallagher, Paul
Art Unit	3621
Examiner Name	John M. Winter
Attorney Docket Number	017887-005900US
Total Number of Pages in This Submission	6

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): References (3); Return Postcard.
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

RECEIVED
APR 22 2004
GROUP 3600**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual	Townsend and Townsend and Crew LLP Gerald T. Gray	Reg. No. 41,797
Signature	<i>Gerald T. Gray</i>	
Date	April <u>13</u> , 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Jose Luna	Date	April <u>13</u> , 2004
Signature	<i>Jose Luna</i>		



FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180

Complete if Known

Application Number	09/639,014
Filing Date	August 15, 2000
First Named Inventor	Gallagher, Paul
Examiner Name	John M. Winter
Art Unit	3621
Attorney Docket No.	017887-005900US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	2001 385 Utility filing fee	
		1002	340	2002 170 Design filing fee	
		1003	530	2003 265 Plant filing fee	
		1004	770	2004 385 Reissue filing fee	
		1005	160	2005 80 Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		** =	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims		** =		X		=	
Multiple Dependent				X		=	

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
		1202	18	2202	9	Claims in excess of 20
		1201	86	2201	43	Independent claims in excess of 3
		1203	290	2203	145	Multiple dependent claim, if not paid
		1204	86	2204	43	** Reissue independent claims over original patent
		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
				1051	130	2051	65	Surcharge - late filing fee or oath	
				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
				1053	130	1053	130	Non-English specification	
				1812	2,520	1812	2,520	For filing a request for reexamination	
				1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
				1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
				1251	110	2251	55	Extension for reply within first month	
				1252	420	2252	210	Extension for reply within second month	
				1253	950	2253	475	Extension for reply within third month	
				1254	1,480	2254	740	Extension for reply within fourth month	
				1255	2,010	2255	1,005	Extension for reply within fifth month	
				1401	330	2401	165	Notice of Appeal	
				1402	330	2402	165	Filing a brief in support of an appeal	
				1403	290	2403	145	Request for oral hearing	
				1451	1,510	1451	1,510	Petition to institute a public use proceeding	
				1452	110	2452	55	Petition to revive - unavoidable	
				1453	1,330	2453	665	Petition to revive - unintentional	
				1501	1,330	2501	665	Utility issue fee (or reissue)	
				1502	480	2502	240	Design issue fee	
				1503	640	2503	320	Plant issue fee	
				1460	130	1460	130	Petitions to the Commissioner	
				1807	50	1807	50	Petitions related to provisional applications	
				1806	180	1806	180	Submission of Information Disclosure Stmt	180
				8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
				1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
				1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
				1801	770	2801	385	Request for Continued Examination (RCE)	
				1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)180

SUBMITTED BY

Complete (if applicable)

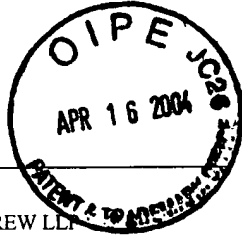
Name (Print/Type)	Gerald T. Gray	Registration No. (Attorney/Agent)	41,797	Telephone	925-472-5000
Signature				Date	April 13, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT
Attorney Docket No.: 017887-005900US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



On April 13, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Paul Gallagher et al.

Application No.: 09/639,014

Filed: August 15, 2000

For: SYSTEMS AND METHODS FOR
IMPLEMENTING PERSON-TO-
PERSON MONEY EXCHANGE

Examiner: John M. Winter

Art Unit: 3621

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on the attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references are enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

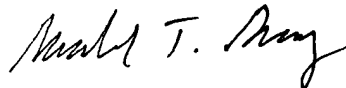
As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

04/19/2004 DEMANU1 00000123 201430 09639014
01 FC:1806 180.00 DA

This IDS is being filed before the mailing date of the final Office Action or
Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please
deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Gerald T. Gray
Reg. No. 41,797

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 925-472-5000
Fax: 925-472-8895
GTG:jvl



INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Substitute for form 1449A/PTO	
		Complete if Known	
		Application Number	09/639,014
		Filing Date	August 15, 2000
		First Named Inventor	Gallagher, Paul
		Art Unit	3621
Examiner Name	John M. Winter		
Attorney Docket Number	017887-005900US		
Sheet	1	of	1

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	1.	2002/0004772 A1	01-10-2002	Templeton et al.	
	2.	2002/0095651 A1	07-18-2002	Kumar et al.	
	3.	2002/0152160 A1	10-17-2002	Allen-Rouman et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁸
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
								<input type="checkbox"/>
								<input type="checkbox"/>

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Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.